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REPORT ON CONTRIBUTIONS BY MEMBER STATES AND OTHERS TO UNFPA AND REVENUE PROJECTIONS FOR 2010 AND FUTURE YEARS

Report of the Executive Director

Summary

This report is prepared in response to Executive Board decisions 99/5 and 2000/9, which requested the Executive Director to provide annually updated estimates of regular and co-financing resources. In line with the UNFPA strategic plan, 2008–2013, the purpose of the present report is to promote dialogue between UNFPA and its Executive Board on the Fund's overall resource situation while continuing to address the important goal of increasing regular resources and achieving a stable and predictable resource base.

In 2009, UNFPA income for regular and co-financing resources was $762.1 million. The breakdown of this total income is $486.4 million in regular resources and $275.7 million in co-financing resources. All 2009 financial data used in the present report are provisional and all 2010 data are estimates.

In line with the recommendations of General Assembly resolution 62/208, UNFPA is steadfast in its belief that a stable base of regular resources is critical to enable UNFPA to support countries in implementing the Programme of Action of the International Conference on Population and Development and achieving the Millennium Development Goals. Furthermore, as underscored in resolution 62/208, UNFPA recognizes that non-core (co-financing) resources represent an important supplement to the Fund's regular resource base.

The Executive Board may wish to adopt a decision on funding commitments to UNFPA. Elements for a decision are provided in the final section of the present report.

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I. INTRODUCTION

1. This report is prepared in response to Executive Board decisions 99/5 and 2008/9, which requested the Executive Director to provide annually updated estimates of regular and co-financing resources. In line with the UNFPA strategic plan, 2008–2013,[1] the purpose of the present report is to promote dialogue between UNFPA and its Executive Board on the Fund's overall resource situation, while continuing to address the important goal of increasing regular resources and achieving a stable and predictable resource base.

2. United Nations General Assembly resolution 62/208 stresses, inter alia, that core resources are the bedrock of the operational activities for development of the United Nations system. The resolution also urges countries in a position to do so to substantially increase their voluntary contributions and, if possible, to contribute on a multi-year basis. Furthermore, the resolution notes that non-core resources represent an important supplement to core resources and recognizes the establishment of a number of multi-donor funding mechanisms. Such a trend is also becoming apparent in UNFPA. Meanwhile, UNFPA continues to advocate for the increase of its regular resources, which are the foundation of the Fund's operations, supplemented by various modalities of co-financing funding.

3. The recent economic downturn has raised concerns about continued official development assistance commitments. The impact of the crisis on donor contributions to UNFPA was not significant in 2009; however, it is anticipated that donor budgets may be affected in 2010 and beyond. Currently, the picture is mixed as UNFPA has received indications from some donors of their intention to scale back their contributions, while others have confirmed that they would maintain the same or slightly increase the level of their contributions.

4. The current financial situation has direct implications for the attainment of the goals of the International Conference on Population and Development (ICPD) and the Millennium Development Goals (MDGs), as well as for UNFPA-supported programmes. As progress on MDG 5 for maternal health, including universal access to reproductive health, was unacceptably slow before the current economic situation, and given that the pace of progress must be stepped up to reach the levels of coverage needed to achieve the health-related MDGs, the current situation poses the risk of further delaying the realization of these key development goals.

5. A slowdown in economic growth can adversely impact UNFPA programme implementation in the areas of population and development, reproductive health and rights, and gender equality, as a result of, inter alia, possible weakening of national social protection systems, decreased development spending, a decline in public health budgets and any increase in socio-economic instability. Funding for sexual and reproductive health, including HIV prevention, gender equality and women's empowerment, and preventive health care in general,

[1] Through its decision 2009/16, the Executive Board extended the UNFPA strategic plan, 2008-2011, to 2013, including the integrated financial resources framework and the UNFPA global and regional programme.

must be maintained, given their long-term positive impact on development and economic growth.

6. The year 2010 began with optimistic projections (in January) for UNFPA regular contributions income at $487 million. At that time, the exchange rates of the euro and other currencies were more favourable against the US dollar. However, the US dollar has subsequently continued to strengthen resulting in a downward trend in the Fund's projections with an estimation of $467.0 million as of 1 March 2010. UNFPA depends on a limited number of donors for 95 per cent of its regular resources and the majority of the contributions are received in national currencies which are subject to the volatility of exchange rates. Of the top 20 major donors projected for 2010, only 12 have submitted written commitments and six have paid in full as of 1 March 2010. Of the $467.0 million projected in contributions, as of 1 March 2010, only $95.9 million (20.5 per cent) had been received. Last year, around this time, out of the total contributions of $469.4 million, $117.0 million (24.9 per cent) had been received as of 1 March 2009. In this regard, UNFPA appeals to all donors to provide their contributions as early as possible.

7. The present report contains tables on UNFPA regular and co-financing contributions. Additional data are provided in the annexes. The donor income figures are inclusive of exchange rate gains and losses. The data projected for 2010 in this document are based on information received and commitments and contributions recorded as of 1 March 2010. All 2009 financial data used in this report are provisional and all 2010 data are estimates.

II. REGULAR AND CO-FINANCING RESOURCES

A. Income overview of regular resources

Table 1: UNFPA income, 2006–2009, as of 31 December 2009, and 2010 projected income as of 1 March 2010 (in millions of $)

	2006	2007	2008	2009	2010
Regular	389.3	457.1	469.5	486.4	467.0
Co-financing	173.2	258.2	331.2	275.7	225.0
Total	562.5	715.3	800.7	762.1	692.0

Note: The data for 2006 to 2009 include contributions, interest and other income. The data for 2010 only include projected contributions and do not include interest income. Also, the 2010 co-financing income figure is an estimate as per the strategic plan and the actual co-financing income is expected to be higher.

8. In 2009, UNFPA income for regular and co-financing resources was $762.1 million (table 1). The breakdown of this total income is $486.4 million in regular resources and $275.7

million in co-financing resources. The regular resources income of $486.4 million includes $469.4 million in voluntary contributions, $10.7 million in interest income, and other income of $6.3 million. Compared to 2008, the increase in income for regular resources in 2009 was $16.9 million, or 3.6 per cent.

9. The co-financing income of $275.7 million in 2009 includes $270.1 million in contributions and $5.4 million in interest income and 0.2 million in other income. The decrease in income for co-financing in 2009 from the 2008 level of $331.2 million was $55.5 million, or 16.8 per cent. Out of the total co-financing income of $275.7 million, total contributions for co-financing decreased by $52.6 million, or 16.3 per cent from $322.7 million in 2008 to $270.1 million in 2009. This means that the proportion of co-financing contributions of total core and co-financing contributions income remained between 30 to 35 per cent until 2007, grew to 41 per cent in 2008 and went down to 37 per cent in 2009.

10. In accordance with the integrated financial resources framework of the current UNFPA strategic plan, the regular and co-financing resource requirements (for the original period of 2008-2011) amount to $2,649 million for four years. The annual targets in the strategic plan have proven to be conservative and UNFPA has consistently surpassed them. The resource requirements will be revisited during the upcoming midterm review wherein revised estimates up to 2013 will be discussed. The 2009 strategic plan targets of $433 million for regular contributions and $200 million for co-financing contributions were surpassed respectively by $36.4 million (8.4 per cent) for regular contributions, which totalled $469.4 million, and by $70.1 million (35.1 per cent) for co-financing contributions, which totalled $270.1 million as of 31 December 2009.

11. UNFPA core contributions in 2008 and 2009 were $428.8 million and $469.4 million, respectively, indicating an increase of $40.6 million in 2009. This was due to a number of increases in core contributions from major donors (which offset reductions by other donors) and the renewed contribution from the United States of America. Some donors, when faced with potential cuts due to the economic situation, did give priority to preserving their core contributions to UNFPA. However, as noted above, total 2009 contributions for co-financing dropped by $52.6 million, from $322.7 million in 2008 to $270.1 million in 2009.

12. According to recent data, reductions of core contributions for 2010 from the 2009 level have already been announced by five of the Fund's top donors although their 2010-2011 budget proposals for the most part underline their continued strong support to UNFPA. Several other donors are set to increase their contributions for 2010. The return in 2009 of the United States with a total contribution of $40.1 million received in 2009 for core resources is an important political and financial development.

13. As of 1 March 2010, the projected regular contributions from donor countries for 2010 were estimated at $467.0 million, a projected decrease of $2.4 million (0.5 per cent) over the 2009 level of $469.4 million, at the 1 March 2010 United Nations exchange rate. UNFPA will continue to advocate for the increase in contributions with members of the Organization for

Economic Co-operation and Development (OECD) Development Assistance Committee (DAC) and non-DAC members, including programme countries. In mobilizing resources for its programmes, UNFPA will also continue to reach out to the private sector and foundations.

14. The income overview in table 1 is supplemented by annex 1, which provides detailed information on UNFPA 2009 provisional income as of 31 December 2009, actual commitments and the best estimates of contributions to UNFPA regular resources, and a list of donors for the year 2010, as of 1 March 2010. These contribution commitments include the following: (a) commitments for 2010 only and multi-year pledges for 2010 and future years; (b) commitments for 2010 received during the United Nations Pledging Conference held on 9 November 2009 in New York; and (c) letters received and verbal indications from governments confirming support to UNFPA for the period 2010 and onwards.

15. The total number of multi-year commitments received in 2009 was 54. Out of the 101 donor governments, 13 countries belonging to OECD/DAC, and 36 programme countries increased their contributions in national currency terms (for those contributions received in national currency) and US dollar terms (for those contributions received in US dollars). As of 1 March 2010, 77 official commitments for 2010 had been received, of which 71 were multi-year commitments. These are listed in annex 2.

16. In 2009, the Netherlands, Sweden, Norway, United States, Denmark, United Kingdom of Great Britain and Northern Ireland, Japan, Finland, Germany and Spain were the Fund's 10 largest donors in US dollar terms to regular resources. Donors that have increased their contributions are listed in table 2.

Table 2. Increases in contributions of major donors to UNFPA regular resources (2008–2009), as of 31 December 2009 (in millions)

Major donors	Pledging currency	2008	2009	Increase/decrease in %
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
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[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

17. Further details on contributions from the Fund's top 10 donors to regular resources for the past five years are provided in annex 3.

14. Projections for 2010 regular contributions income include indications from the following major donors that have increased or will increase their respective contributions in 2010: Australia, Austria, Canada, China, Finland, Italy and the United States. A number of donors have submitted multi-year commitments up to 2011, including Australia, Belgium, Finland, Ireland, Luxembourg, Netherlands, Norway and the United Kingdom. However, of particular concern is the current volatility of the exchange rates which may result in a decrease in the US dollar equivalent for contributions not yet received. Table 3 lists the increases in national currency terms in 2010 compared to the 2009 contribution level.

Table 3. Projected increases in local currency contributions of major donors to UNDP/UNFPA regular resources (2009–2010) as of 1 March 2010 (in millions)

Major donors	Pledging currency	2009	2010	Increase/decrease in %
Australia	A$			
Austria	€			
Canada	C$			
China	US$			
Finland	€			
Italy	€			
United States	US$			

II. Overview of co-financing contributions

15. Over the last decade, other resources in the form of earmarked contributions to UNDP/UNFPA supported thematic funds, projects and programmes, also referred to as co-financing resources, have increased steadily in absolute terms. However, in the last few years, the proportion of co-financing contributions of total core and co-financing contributions income remained between 30 to 35 per cent until 2007, grew to 40 per cent in 2008 and went down to 37 per cent in 2009. The total for co-financing contributions received in 2009 was $[xxx] million. This represents a decrease of [x.x] per cent over the $[xxx].[x] million received in 2008. Notable increases in co-financing contributions in 2009 from the 2008 level occurred in joint funding mechanisms ([xx.x] per cent). See also table 4.

Table 4. Contributions to UNFPA co-financing resources (2008–2009)
as of 31 December 2009 (in millions of $)

Donors	2008	Donors	2009
Netherlands	42.2	Netherlands	54.3
European Commission	35.8	UNDP*	43.7
Spain	33.7	Spain	29.4
United Kingdom	22.7	United Kingdom	23.7
UNAIDS	16.1	Office for the Coordination of Humanitarian Affairs,	9.9
Office for the Coordination of Humanitarian Affairs,	15.8	including Central Emergency Response Fund	
including Central Emergency Response Fund		Sweden	9.4
Luxembourg	11.3	Australia	8.3
Norway	10.9	European Commission	8.3
UNDP*	10.7	Norway	8.3
Canada	10.2	Luxembourg	7.3
Other donors	136.4	Other donors	45.4
Total**	353.7	Total**	356.1

*Includes contributions from multi-donor trust funds (MDTFs).

**With the inclusion of interest income, the total for 2008 is $372.1 million and for 2009 is $377.7 million.

Co-financing contributions from governments

29. Out of $378.1 million received in 2009, co-financing from programme country governments in support of their own country programmes continued to form a solid part of the total income. In 2009, $319.7 million was received compared to $291.7 million in 2008, a increase of $28.0 million (9.6 per cent). The 2009 contributions were from Belize, Botswana, Brazil, Colombia, Dominican Republic, Equatorial Guinea, Gabon, Georgia, Guatemala, Jamaica, Lebanon, Malaysia, Morocco, Nigeria, Panama, Sao Tome and Principe, Syrian Arab Republic and Uruguay. The five largest contributions in 2009 were received from Colombia ($72.6 million), Morocco ($67.2 million), Syrian Arab Republic ($62.9 million), Guatemala ($11.4 million) and Nigeria ($11.2 million). Details on the contributions are presented in annex 4 of the report.

European Commission

31. In 2009, co-financing contributions from the European Commission totalled $8.3 million, including contributions from the European Commission's Directorate-General for Humanitarian Aid. A contribution of $29.8 million was received in 2008.

32. New contribution agreements were signed including to improve access to reproductive health commodities in the African, Caribbean and Pacific States; conduct the population and housing census in Malawi and Niger; support sexual and reproductive health and gender-based violence prevention activities in Chad; and provide continued support to reproductive health services in Nepal.

Co-financing contributions from United Nations agencies/entities

23. Out of the total co-financing contribution of $270.1 million in 2009 (table 4), a total of $78.9 million was received from United Nations entities. The breakdown is as follows: UNFPA received co-financing contributions from United Nations joint funding mechanisms in 2009 in the amount of $65.6 million compared to $51.9 million in 2008. This includes $32.1 million from multi-donor trust funds governed by UNDP rules, $8.5 million from the United Nations Central Emergency Relief Fund (CERF), $1.8 million from the United Nations Human Security Trust Fund established by Japan and $23.0 million for participation in joint programmes. Out of the $23 million received for participation in joint programmes, $14.7 million was received through United Nations entities and $8.3 million directly from donors when UNFPA was selected as the joint programmes' administrative agent. A total of $13.3 million was contributed by United Nations entities. Out of this total amount, $5.7 million was received from UNAIDS, $2.7 million from UNDP, $2.0 million from WHO, and $2.9 million from other United Nations agencies.

C. Thematic funding

24. Thematic funds are pooled donor funds aimed at supporting the achievement of results in the framework of the UNFPA extended strategic plan, 2008-2013. They support the approved programmes in the priority areas of the Fund's work in priority countries with special needs and embrace a coherent approach to align with national plans and budgets. The predictability of resources in the thematic funds creates a unique opportunity to focus and scale up programming to help meet unmet needs. Thus far, UNFPA has established three reproductive health-related thematic funds for: (a) reproductive health commodity security; (b) maternal health; and (c) adolescents. Totals. Out of the total co-financing contribution of $270.1 million in 2009 (table 4), $69.9 million was received in 2009 for the three thematic funds.

25. In order to increase the effectiveness and efficiency of support to countries and to reduce administrative and transaction costs at all levels – country, regional and global – UNFPA devoted considerable efforts to programmatically integrating the three thematic funds during 2009, while maintaining separate resource mobilization streams. An interdivisional working group worked towards an integrated country selection and support process across the thematic funds and ensured coordinated criteria for resource allocation. The funds are being realigned with the duration of the strategic plan (which the Executive Board has extended to 2013), while allowing for continuous adaptation to changing funding opportunities and environment.

Thematic fund for reproductive health commodity security

26. Since 2007, the thematic fund for reproductive health commodity security (RHCS), which finances the Global Programme to Enhance Reproductive Health Commodity Security, has helped UNFPA work with national governments to carry out the diverse and multifaceted work needed to achieve RHCS. The Global Programme is designed to act as a catalyst to the prioritization and subsequent mainstreaming of RHCS into national health policies, programmes,

budgets and plans. As a result, countries are beginning to move towards more predictable, planned and sustainable country-driven approaches to securing essential supplies and ensuring their use. In 2009, the Global Programme was active in 73 countries, up from 54 in 2008. The major emphasis was on 11 high-priority (Stream One) countries[2] with a particular focus on sub-Saharan Africa. Monitoring the performance of all countries supported by the Global Programme and measuring its impact were key priorities in 2009. An online tool was implemented to facilitate the periodic monitoring of RHCS-related process indicators, allowing the Global Programme to gather valuable data on progress and results at the national, regional and global levels.

27. Co-financing contributions for the Global Programme amounted to $58.8 million in 2008 and $72.5 million in 2009, an increase of $13.7 million, i.e., 23.3 per cent as shown in table 5.

Table 5: Co-financing contributions received for the thematic fund for reproductive health commodity security (2008-2009) as of 31 December 2009 (in millions of $)

Donors	2008	Donors	2009
Netherlands	34.1	Netherlands	45.8
United Kingdom	8.7	United Kingdom	16.7
Spain*	8.3	Spain*	7.4
Finland	3.0	Canada	2.0
Canada	2.5	Luxembourg	0.6
Ireland	1.6		
Luxembourg	0.6		
	58.8		72.5

*Includes contribution from the Autonomous Community of Catalonia

Maternal health thematic fund

28. The maternal health thematic fund (MHTF) which became operational in January 2008, aims at scaling up UNFPA and development partners' response to MDG 5 on improving maternal health.

29. The MHTF contributes to a larger joint effort by the Health 4 (UNFPA, UNICEF, WHO, the World Bank) and UNAIDS to accelerate progress towards MDGs 4, 5 and 6. The Fund also contributes to the work of the alliance between Columbia University's Averting Maternal Death

[2] Burkina Faso, Ethiopia, Haiti, Lao People's Democratic Republic, Madagascar, Mali, Mongolia, Mozambique, Nicaragua, Niger and Sierra Leone.

and Disability Program, UNICEF and UNFPA to work together with governments and key partners to strengthen national planning for emergency obstetric care and human resources for maternal and newborn health.

30. As part of the above-mentioned efforts to integrate thematic funds, the midwifery programme became integrated into the maternal health thematic fund as of April 2009, followed by the Campaign to End Fistula, as of September 2009.

31. In 2009, the MHTF provided an integrated package of support with a focus on strengthening national capacity for planning and for the scaling up of services, as well as for strengthening of monitoring and evaluation, surveillance of adverse outcomes (maternal deaths, obstetric fistula), communication, resource mobilization, and partnerships to 11 priority countries[1]. Additionally, four countries received support for midwifery[2] while 25 countries received support for fistula[3].

32. Co-financing contributions received for maternal health amounted to $10.7 million in 2008 and $14.4 million in 2009, i.e., an increase of $3.7 million or 34.6 per cent as shown in table 6.

Table 6: Co-financing contributions received for the maternal health thematic fund, 2008-2009 as of 31 December 2009 (in millions of $)

Donors	2008	Donors	2009
Spain	7.8	Spain	6.9
Luxembourg	1.7	Sweden	3.2
Finland	0.6	Netherlands	2.4
Austria	0.6	Luxembourg	1.4
		Austria	0.5
		Private	0.002
	10.7		14.4

Thematic fund for obstetric fistula

33. Since 2003, UNFPA has led the global Campaign to End Fistula, through a collaborative effort to prevent obstetric fistula and restore the health and dignity of women living with its

[1] Benin, Burkina Faso, Burundi, Cambodia, Djibouti, Ethiopia, Guyana, Haiti, Madagascar, Malawi and the Sudan.
[2] Côte d'Ivoire, Ghana, Uganda and Zambia.
[3] Afghanistan, Bangladesh, Benin, Central African Republic, Chad, Côte d'Ivoire, Congo, Democratic Republic of the Congo, Eritrea, Gabon, Ghana, Guinea, Guinea-Bissau, Kenya, Liberia, Malawi, Mauritania, Nepal, Niger, Nigeria, Pakistan, Senegal, Somalia, Sudan and Zambia.

consequences. The Campaign has grown significantly since its inception – from 12 countries to 36 countries in sub-Saharan Africa, Asia and the Arab States regions. Not only has the number of countries increased, but also, importantly, the scale of programming within campaign-supported countries has expanded. Countries are increasingly moving from assessment of needs to strategy development and programme implementation. In 2009, the Campaign to End Fistula received approximately $7 million from a number of partners listed in table 7. During 2009, the operations of the fistula fund were aligned with the maternal health thematic fund. With the emergence of the MHTF and its extension until 2013, the fistula programming will be integrated into the Fund's activities, while leaving the option open to donors for separate funding for the Campaign to End Fistula. Co-financing contributions received for obstetric fistula amounted to $6.3 million in 2008 and $7 million in 2009, an increase of $0.7 million, i.e., 11.1 per cent as shown in table 7.

Table 7: Co-financing contributions received for the Campaign to End Fistula (2008–2009) as of 31 December 2009 (in millions of $)

Donors	2008	Donors	2009
Luxembourg	4.57	Spain*	3.5
Spain*	0.60	Norway	1.7
Republic of Korea	0.49	Luxembourg	0.8
Zonta International Foundation	0.25	Republic of Korea	0.5
Americans for UNFPA	0.22	Iceland	0.2
European Voice	0.04	Americans for UNFPA	0.1
Poland	0.04	New Zealand	0.1
United Nations Fund for International Partnerships	0.03	Zonta International	0.1
Private contributions	0.02	Poland	0.1
		Women's Missionary Society	0.025
		Private contributions	0.003
	6.3		7.0

*Includes contribution from the Autonomous Community of Catalonia.

D. Contributions to UNFPA for emergencies/humanitarian assistance

34. In 2009, co-financing resources continued to represent a crucial support to UNFPA efforts to meet its objective to integrate the ICPD Programme of Action into emergency preparedness, humanitarian response, and transition and recovery programmes. In 2010, thus far, 88 countries and territories have benefited from these co-financing contributions from 19 donors (governments, private sector and United Nations entities). The total amount of co-financing funds that UNFPA received for humanitarian response was $37.4 million. Uganda received the largest contribution of $2.0 million, from Norway, for gender-based violence prevention.

35. Since its inception in 2006, the United Nations Central Emergency Response Fund has become an important humanitarian funding tool for UNFPA. Funding from CERF has evolved as follows: $1.7 million in 2006; $8.5 million in 2007; $10.0 million in 2008; and $8.5 million in 2009. Fifty-two per cent of the CERF funding received by UNFPA went to under-funded crises and 48 per cent was allocated to rapid response interventions.

36. The 2009 contribution in the amount of $8.5 million enabled UNFPA to respond to the needs of 31 countries. Through CERF contributions, UNFPA supported, inter alia, the implementation of emergency health interventions for internally displaced populations, provision of reproductive health services and commodities, including reproductive health kits for safe deliveries and the management of obstetric complications, and gender-based violence prevention and response.

37. While country programmes received substantial co-financing resources, the institutional core humanitarian response capacity was also strengthened by the financing of projects ranging from the global advocacy for sexual and reproductive health programmes in crisis situations, gender equity and the prevention of gender-based violence, to the scaling up of HIV/AIDS interventions in emergency settings.

38. Global capacity-building and advocacy projects and events were co-financed by Australia, Belgium, Canada, Germany, Ireland, Norway and Sweden. UNFPA partnerships with UNAIDS, UNIFEM and Columbia University also entailed co-financing projects to further the ICPD agenda and substantiate UNFPA commitments within global inter-agency humanitarian policymaking.

E. Contributions from the private sector

39. The total amount of co-financing contributions received from the private sector during 2009 was $3.5 million compared with $2.6 million in 2008. Of the 2009 amount, $0.1 million was contributed through Americans for UNFPA. Also, UNFPA was the direct recipient of donations from private corporations ($1.2 million), foundations ($2.1 million) and individuals ($0.1 million). In line with the Secretary-General's recently revised guidelines on cooperation between the United Nations and the private sector, UNFPA is developing an internal concept paper to explore potential opportunities for increased engagement with the private sector.

III. CONCLUSION

40. In line with the recommendations of General Assembly resolution 62/208, UNFPA is steadfast in its belief that a stable base of regular resources is critical to enable UNFPA to support countries in implementing the ICPD Programme of Action and achieving the MDGs. Regular resources are also essential for maintaining the universality, neutrality and multilateralism that characterize UNFPA efforts to carry out its mandate as a trusted and valued partner leveraging impact far beyond the modest resources it is able to provide. UNFPA regular resources increased from $469.5 million in 2008 to $486.4 million in 2009.

41. Co-financing contributions decreased from $322.7 million in 2008 to $270.1 million in 2009. As stated in General Assembly resolution 62/208, the growth of extra-budgetary funding and of the number of associated projects carries a risk of increased transaction costs. UNFPA is mindful of this and seeks to maintain an even balance between regular and co-financing resources. The proportion of co-financing contributions of total core and co-financing contributions income remained between 30 to 35 per cent until 2007, grew to 41 per cent in 2008 and went down to 37 per cent in 2009.

42. UNFPA values its close collaboration with the Executive Board and all Member States and appreciates their commitment, continued cooperation and unwavering support. It is in this spirit that UNFPA appeals to the Fund's donor family to support the multi-year funding format as urged in General Assembly resolution 62/208, and as supported in Executive Board decisions 2003/19, 2004/24, 2005/24, 2006/12, 2007/13, 2008/10 and 2009/17. Such support is critical in ensuring predictable and sustainable funding to enable UNFPA to plan and deliver its multi-year programmes in support of countries. It is notable that 54 countries submitted multi-year pledges in 2009, including six major donors.

43. In view of the current global financial crisis, UNFPA appeals to the Executive Board and all members of the Fund's donor family to maintain their financial support to UNFPA. A more predictable cash flow is important for good management of UNFPA operations. It is in this context that UNFPA encourages all Governments, particularly the major donors, for the timely submission of their contribution commitments and payment schedules.

44. In accordance with the integrated financial resources framework of the UNFPA strategic plan, the approved resource requirements for regular and co-financing resources amount to $2,595 million for the original four-year period (2008–2011). Thus far, the contributions income for regular and co-financing has surpassed the annual strategic plan targets. However, the targets in the current strategic plan are conservative.

45. The integrated financial resources framework in the strategic plan increases the proportion and amount of resources directed to country programmes compared to those in the multi-year funding framework, 2004–2007, and UNFPA will make every effort to focus any real income growth primarily at the country level during the strategic plan period. The impact of the current global financial crisis may further delay the progress necessary to achieve the ICPD goals and the MDGs, with the most impact being felt in the least developed countries. Indeed, if funding for family planning and reproductive health is not increased, efforts to reduce maternal and child mortality and meet unmet needs will be undermined, especially in the poorest countries. This will affect progress towards the achievement of the ICPD goals, as well as the MDGs. Commitment to mobilize sufficient funding is now more important than ever.

IV. ELEMENTS FOR A DECISION

46. The Executive Board may wish to:

(a) *Take note* of the report on contributions by Member States and others to UNFPA and revenue projections for 2010 and future years (DP/FPA/2010/18);

(b) *Welcome* the increase in the 2009 regular income level of UNFPA and *also welcome* the contributions made by programme countries;

(c) *Emphasize* that regular resources are the bedrock of UNFPA and essential to maintaining the multilateral, neutral and universal nature of its work, and *encourage* UNFPA to further mobilize these resources while also continuing to mobilize supplementary resources for its thematic funds and programmes;

(d) *Recognize* that sustaining and improving the UNFPA funding level will require countries that are in a position to do so to increase their contributions during the period of the UNFPA strategic plan;

(e) *Encourage* all countries that are in a position to do so to make contributions early in the year and to make multi-year pledges;

(f) *Emphasize* that UNFPA needs strong political and increased financial support as well as increased and predictable core funding in order to enhance its assistance to countries to fully integrate the agenda of the International Conference on Population and Development into national development strategies and frameworks and achieve the internationally agreed development goals.

Annex 1: UNFPA regular resources for 2008, 2009 (provisional) and estimates for 2010 (by major donors and geographical regions)

as of 1 March 2010

Countries/Territories	2008 1/ Contributions		2009 1/ Contributions/Estimates		2010 1/ Contributions/Estimates	
	Local Currency	US$ Equiv.	Local Currency	US$ Equiv.	Local Currency	US$ Equiv.
Major Donors						
Netherlands (the)	58,538,000	75,728,331	62,538,000	80,880,874	54,538,000	73,600,540
Sweden	400,000,000	60,902,179	450,000,000	59,016,008	423,500,000	58,575,380
Norway	332,000,000	47,564,470	332,000,000	48,046,310	332,000,000	55,611,390
United States of America (the)				46,100,000		46,400,000
Denmark	230,000,000	48,016,701	230,000,000	39,498,540	205,700,000	37,250,996
Finland	16,000,000	24,205,749	21,000,000	27,851,459	25,000,000	33,738,192
United Kingdom of Great Britain and Northern Ireland (the)	20,000,000	30,721,966	22,005,000	34,510,377	20,000,000	30,581,040
Japan		29,660,126		30,065,759		25,100,000
Germany	18,000,000	26,677,320	18,000,000	25,340,848	18,000,000	24,291,498
Spain	14,000,000	18,134,715	14,000,000	20,710,059	14,000,000	18,893,387
Canada	14,850,000	14,573,111	14,850,000	11,861,022	17,350,000	16,275,797
Switzerland	14,000,000	11,814,346	14,000,000	12,477,718	14,000,000	12,915,129
Australia	6,000,000	5,684,400	6,000,000	4,709,576	8,000,000	7,311,852
Belgium	3,000,000	3,886,010	4,500,000	6,184,871	3,500,000	4,723,347
New Zealand	4,500,000	3,471,300	6,000,000	3,459,000	6,000,000	4,423,800
Ireland	4,500,000	6,807,867	3,000,000	4,219,409	3,000,000	4,048,583
Luxembourg	2,300,000	3,933,434	2,650,000	3,477,690	2,650,000	3,576,238
France	2,500,000	3,698,225	2,200,000	2,813,299	1,700,000	2,294,197
Austria	1,200,000	1,832,316	1,250,000	1,656,555	1,300,000	1,826,639
Italy	4,000,000	5,899,705	500,000	697,350	1,000,000	1,400,560
China		900,000		950,000		1,050,000
Subtotal		**424,112,271**		**464,526,724**		**463,888,565**
Africa						
Angola		5,000				
Benin		15,457		4,000		4,000
Botswana		4,500				
Burkina Faso		1,975		40,372	4,000,000	8,229
Burundi	1,000,000	844		783		
Cameroon	10,000,000	21,232	20,000,000	45,125	20,000,000	41,147
Cape Verde		1,182		1,181		
Central African Republic (the)		2,500		2,500		
Chad		30,000		35,000		
Comoros (the)		500		1,500		
Congo (the)	24,000,000	51,850	24,000,000	53,941	24,000,000	49,376
Côte d'Ivoire		10,000		15,000		10,000
Democratic Republic of the Congo (the)		5,000				
Equatorial Guinea		41,029		41,029		41,029
Eritrea		2,000		2,000		2,000
Ethiopia	30,000	3,015	30,000	2,390		
Gabon	5,000,000	11,855	50,000,000	106,432	50,000,000	102,867
Gambia (the)	250,000	19,088		9,473		
Ghana		12,500		12,500		12,500
Guinea		4,000		1,000		
Guinea-Bissau		1,000		1,000		
Kenya		9,984		10,000		

Countries/Territories	2008 1/ Contributions		2009 1/ Contributions/Estimates		2010 1/ Contributions/Estimates	
	Local Currency	US$ Equiv.	Local Currency	US$ Equiv.	Local Currency	US$ Equiv.
Lesotho	19.000	2.705	20.900	2.216	22.900	2.990
Liberia		10.000		10.000		10.000
Madagascar	17.200.000	12.420				2.500
Malawi		3.000		1.000		
Mali	3.000.000	6.667	3.000.000	6.543	3.000.000	6.405
Mauritania	2.888.100	12.186	1.000.000	4.143	1.000.000	3.846
Mauritius	100.000	3.623		2.981		
Mozambique		2.000		2.000		
Namibia		1.000		1.000		
Niger (the)		10.000		10.000		10.000
Nigeria		31.167		31.167		31.167
Rwanda		300				
Sao Tome and Principe	50.000.000	3.448		10.643		
Senegal	9.000.000	20.001	9.000.000	19.629		
Seychelles	11.000	577		2.000		
Sierra Leone	30.000.000	10.074	30.000.000	8.000	30.000.000	8.000
South Africa	170.000	22.222	180.000	22.756	190.000	25.199
Swaziland		10.000		16.658		10.000
Togo	5.500.000	11.472	3.000.000	6.543		
Uganda		9.805		19.746		
United Republic of Tanzania (the)	6.000.000	5.063	6.000.000	5.385		
Zambia		5.980		4.000		4.000
Zimbabwe	25.000.000		30.000.000	-	30.000.000	200
Subtotal		**448.221**		**571.636**		**385.455**
Asia and the Pacific						
Afghanistan		100				100
Bangladesh		28.015		28.008		28.000
Bhutan		5.950		6.055		5.950
Cambodia		2.200		6.064		
Cook Islands (the)	1.500	1.154	1.500	1.913		
Fiji	5.000	3.268	5.000	2.632	5.000	
India		473.261	23.857.400	497.029		500.000
Indonesia		69.849		72.234		35.000
Iran (Islamic Republic of)		61.687		50.000		
Kiribati				705		
Republic of Korea (the)		100.000		100.000		
Lao People's Democratic Republic (the)		1.500		1.500		
Malaysia		215.000		215.000		15.000
Maldives		5.000				5.000
Marshall Islands (the)		100		100		100
Micronesia (Federated States of)		1.000		1.000		
Mongolia		4.000		4.000		4.000
Myanmar	200.000	160	200.000	198		
Nauru						
Nepal	400.000	5.041			400.000	5.435
Niue			1.102	565		
Pakistan		417.457	40.000.000	491.280		
Palau						
Papua New Guinea	10.000	3.774	10.000	4.082		
Philippines (the)	2.500.000	60.125	2.700.000	53.895	3.000.000	64.921
Samoa		1.000		3.000		3.000
Singapore		5.000		5.000		5.000

Countries/Territories	2008 1/ Contributions		2009 1/ Contributions/Estimates		2010 1/ Contributions/Estimates	
	Local Currency	US$ Equiv	Local Currency	US$ Equiv	Local Currency	US$ Equiv
Solomon Islands		200		1.000		
Sri Lanka		18.000		18.000		18.000
Thailand		96.000		96.000		96.000
Timor-Leste		1.000				
Tonga		1.000		100		100
Tuvalu		3.000		3.000		3.000
Vanuatu	100.000	893	100.000	892		
Viet Nam		4.256		4.256		4.256
Subtotal		**1,588,990**		**1,667,508**		**792,862**
Eastern Europe and Central Asia						
Albania		100				
Armenia		1.000		1.500		
Azerbaijan	1.000	3.547	3.000	3.733		
Belarus						
Bosnia and Herzegovina				2.000		
Bulgaria		2.000		2.500		
Croatia		22.000		24.000		
Cyprus		1.500		7.698		
Czech Republic (the)		227.311				
Estonia	31.956	46.046	44.728	57.938	25.564	37.617
Georgia		1.600		2.500		
Hungary		20.000		30.000		
Kazakhstan		50.000		350.000		50.000
Kyrgyzstan	50.000.000	1.312		1.313		
Latvia		2.000				
Montenegro		300				
Poland		10.000				
Republic of Moldova (the)		200		200		
Romania	24.213	10.047	30.912	10.443		
Russian Federation (the)		300.000		300.000		300.000
Serbia		100		1.000		
Slovakia	5.000	6.468			10.000	14.430
Slovenia		20.000		21.688		43.011
Tajikistan		300		200		
the former Yugoslav Republic of Macedonia		2.000		2.500		2.500
Turkey		150.000		150.000		150.000
Turkmenistan						
Ukraine		1.000		1.000		1.000
Uzbekistan	1.000.000	783		701		
Subtotal		**879,595**		**970,914**		**782,862**
Western Europe and other States						
Andorra		32.039		29.099		
Greece		8.000		8.000		
Iceland		200.000		200.000		
Israel		10.000		10.000		
Liechtenstein		23.923	25.000	24.062		
Malta				1.000		
Monaco						20.035
Portugal		200.000		200.000	250.000	360.750
Subtotal		**473,962**		**472,161**		**380,785**

Country/Territory	2008 ① Contributions		2009 ① Contributions/Estimates		2010 ① Contributions/Estimates	
	Local Currency	US$ Equiv.	Local Currency	US$ Equiv.	Local Currency	US$ Equiv.
Latin America and the Caribbean						
Antigua and Barbuda		1 000		1 000		1 000
Argentina		5 000		500		1 000
Bahamas (the)		1 000		1 000		
Barbados		5 000		5 000		5 000
Belize		5 000	5 000	2 500		5 000
Bolivia (Plurinational State of)		100		100		100
Brazil		20 000		20 000		
Chile		5 000		5 000		
Colombia		30 405		30 000		50 000
Costa Rica	241 200	1 569		1 747		422
Cuba		5 000		5 000		
Dominica				463		
Dominican Republic (the)		15 000		30 000		
Ecuador		2 000		2 000		2 000
El Salvador		1 000		1 000		2 000
Grenada		100		100		100
Guatemala		5 003		5 000		10 000
Guyana		500		500		500
Haiti		10 000		10 000		10 000
Honduras	64 332	1 000	64 000	3 000		
Jamaica		1 000		1 000		
Mexico		64 561	1 310 300	95 718		
Nicaragua		4 000		4 000		
Panama		10 000		10 000		
Paraguay		762		500		
Peru		2 000				
Saint Kitts and Nevis		500		1 500		
Saint Lucia		500				
Saint Vincent and the Grenadines		100		200		
Suriname		2 000		2 000		2 000
Trinidad and Tobago		5 000		5 000		
Uruguay		3 000		5 000		5 000
Venezuela (Bolivarian Republic of)		10 000		10 000		
Subtotal		**249 986**		**267 214**		**95 742**
Arab States						
Algeria		10 000		10 000		10 000
Bahrain		1 000				
Djibouti		1 000				
Egypt	500 000	107 078	620 000	114 962	650 000	118 367
Iraq		5 000		50 000		
Jordan		50 000		50 000		
Kuwait		10 000		10 000		10 000
Lebanon		2 000		2 000		
Morocco		10 224		10 000		10 000
Occupied Palestinian Territory		1 000				

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[illegible]	Ranking										
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Annex 6. Co-financing contributions from programme countries in support for their own country programmes ($)

	Programme Countries	up to 2004	2005	2006	2007	2008	2009*	Total
1	Algeria	190,606	141,701	152,905				**461,214**
2	Barbados				60,000			**60,000**
3	Belize						48,997	**48,997**
4	Bosnia (Provisional Style of)	10,000						**10,000**
5	Botswana	128,715	110,497	112,994	98,522	96,308	81,081	**628,158**
6	Brazil	2,126,295	100,000	763,800	316,081	868,846	369,061	**4,523,483**
7	Cameroon			992,423		920,870		**1,913,293**
8	Central African Republic (the)				89,489			**89,989**
9	Chile	29,695	14,093	5,462				**49,198**
10	Colombia	2,195,223	86,022	1,095,523	1,319,349	2,727,963	5,554,575	**12,778,655**
11	Cote d'Ivoire					2,345,152		**2,345,152**
12	Democratic Republic (the)			113,234		177,114	340,064	**650,412**
13	Egypt	2,237,411		13,212	17,925	17,953		**2,286,397**
14	Equatorial Guinea		95,832		146,993		68,731	**311,555**
15	Gabon	164,527				106,691	161,070	**432,287**
16	Georgia			186,108	220,899	356,508	547,875	**1,291,390**
17	Guatemala	21,943,893	107,041	440,751	421,219		1,198,576	**24,902,279**
18	Jamaica					210,323	288,999	**499,322**
19	Kazakhstan			28,900				**28,900**
20	Lebanon	3,947,127	159,313	274,574	385,440	758,207	280,794	**4,565,456**
21	Liberia			30,000				**30,000**
22	Malaysia	400,000	200,000	200,000				**800,000**
23	Mexico	4,017,381	334,188	1,069,595	502,266	1,477,403	5,282,693	**12,683,627**
24	Morocco	1,061,662	169,992	1,344,751	95,465	1,110,441	945,595	**4,727,806**
25	Nigeria		786,422	113,708	807,235	851,142	1,189,286	**3,707,886**
26	Oman	473,059						**473,059**
27	Panama				148,721	209,910	65,000	**423,631**
28	Paraguay	251,610	86,812	255,276	552,518			**1,106,257**
29	Peru	16,379,394	19,640,996	14,851,121	8,146,134	4,418,758		**65,136,404**
30	Qatar			30,000				**30,000**
31	Romania					117,130		**117,130**
32	Saint Lucia					17,981		**17,981**
33	Sao Tome and Principe	27,072	26,798	6,530	37,209		32,733	**130,342**
34	Saudi Arabia	200,000						**200,000**
35	Sierra Leone					7,344,000		**7,344,000**
36	South Africa	64,612						**64,612**
37	Suriname	316,921						**316,921**
38	Syrian Arab Republic	2,394,635	849,995	982,308	922,483	1,933,939	1,848,254	**8,931,813**
39	Timor Leste	23,000						**23,000**
40	Tunisia	277,795	38,462	38,168				**354,424**
41	Turks and Caicos	3,462						**3,462**
42	Ukraine				482,693			**482,693**
43	Uruguay			548,024		715,096	1,006,419	**2,269,539**
44	Venezuela (Bolivarian Republic of)		3,544	2,016,319				**2,019,862**
45	Yemen	391,682	340,675					**732,357**
Total		**60,211,857**	**24,223,331**	**25,545,176**	**14,231,139**	**26,281,637**	**19,509,805**	**170,002,945**

* Note: 2009 data are provisional

United Nations DP/FPA/2010/19

Executive Board of the
United Nations Development
Programme and of the
United Nations Population Fund

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UNFPA - Evaluation

UNITED NATIONS POPULATION FUND

BIENNIAL REPORT ON EVALUATION

Report of the Director, Division for Oversight Services

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I. INTRODUCTION

1. Since UNFPA presented the periodic report on evaluation (DP/FPA/2008/10) to the Executive Board at its annual session 2008, the adoption of two General Assembly resolutions (62/208 and 63/311), the endorsement of the Accra Agenda for Action at the Third High-Level Forum on Aid Effectiveness in September 2008, and the adoption of Executive Board decision 2009/18 on the UNFPA evaluation policy (DP/FPA/2009/4) have reshaped the process of evaluation. They have redefined the role of evaluation from the objective assessment of an entity's contributions to development results to that of a joint undertaking of development partners with national ownership and leadership. In the light of this reorientation of evaluation, this report: (a) discusses the role of evaluation within the development environment in which UNFPA works; (b) reviews the performance of the evaluation function in UNFPA, especially in the context of United Nations reform; and (c) identifies areas for improvement. This report is timely because of the forthcoming submission to the Board of more than 40 country programme documents that will be developed under the revised United Nations Development Assistance Framework process.

II. UNFPA AND PARTNERSHIP FOR DEVELOPMENT

2. General Assembly resolution 62/208 stresses the "leadership and ownership of programme countries", and General Assembly resolution 63/311 invites the United Nations Secretary-General to propose "an independent, system-wide evaluation mechanism to assess system-wide efficiency, effectiveness and performance". Ownership, the central theme of the Paris Declaration on Aid Effectiveness and the Accra Agenda for Action, is not about technical issues and evaluation methodologies; rather, it refers to the political commitment of all parties involved in development. The emphasis on the leadership and ownership of programme countries has created a de facto shared responsibility and shared accountability to their respective constituencies. This shared responsibility, elaborated in paragraph 24 of the Accra Agenda for Action, is the necessary condition to fulfil the goals of ownership and partnership. The purpose of evaluation is no longer the assessment of results by individual actors in development, but the assessment of their contributions to partnerships, conducted in close collaboration with all stakeholders, implementing partners and beneficiaries.

3. Despite its wide use, the notion of partnership has become increasingly complex. Since the 2002 International Conference on Financing for Development, the concept of development assistance has undergone a revolution, with new goals, an increasing number of partners, and multiple sources of investments[1], as indicated below:

(a) Development assistance targets a multifaceted set of goals. This diversification is the logical consequence of General Assembly resolution 42/183, which endorsed the concept of sustainable development. Beyond its strong traditional focus on accelerating the economic convergence of developing nations with industrialized economies, development assistance is expanding its scope, reflecting the willingness of the international community (donors, programme countries and civil society) to focus also on providing basic human welfare (for example, the Millennium Development Goals) and other public goods[2];

[1] Severino (J.M.) and Ray (O.), "The End of ODA: Death and Rebirth of a Global Public Policy", Center for Global Development, working paper, Washington, DC, March 2009, http://www.cgdev.org/content/general/detail/1421419/.

[2] Public goods are defined here as "a good that is non-rivalrous and non-excludable. This means that consumption of the good by one individual does not reduce availability of the good for consumption by others, and that no one can

(b) Development assistance has become the concern of numerous governmental and non-governmental actors. According to the Organisation for Economic Co-operation and Development (OECD), the annual contribution of non-governmental organizations, including funds, foundations and initiatives, amounts to the equivalent of 15 per cent of the 2008 total official development assistance;

(c) In many cases, the distribution of investments in the production and maintenance of public goods has shifted from external to internal sources. For instance, many middle-income countries invest more in global public goods for health[3] from their own resources than they receive from external resources. This change has placed the decision-making power and initiative in the hands of programme countries. Even though its annual expenditure is small when compared with the $121 billion in official development assistance in 2008, UNFPA has an important role to play, not as a funding agency, but as a facilitator for innovative interventions, for locally or regionally available expertise and capacity, and for community mobilization.

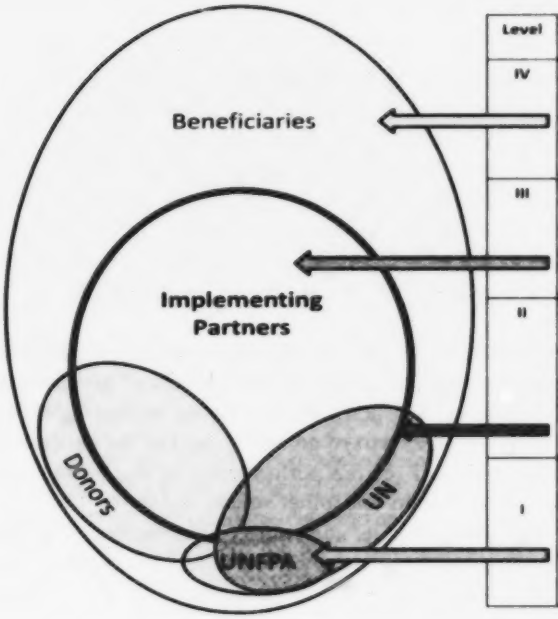
4. In this context of multiple partnerships and programme country leadership, evaluation should be seen as a series of nested functions encapsulated within one another, with different levels of questions to be answered at each level. Levels I to III should address: (a) performance issues within UNFPA; (b) performance issues within the United Nations country team, as part of an assessment of the process of 'delivering as one'[4] and in coordination with other donors; and (c) the performance of the partnership between implementing partners, the United Nations country team and other relevant donors. Level IV should address more complex evaluation questions, and assess results and impact as experienced by the beneficiaries of the partnership between the implementing partners (usually government institutions) and donors. Level IV requires the active participation of actors at the country or community level. These nested evaluation functions are illustrated in figure 1.

be effectively excluded from using the good." See also Joseph E. Stiglitz, *Knowledge as a Global Public Good in Global Public Goods*, ISBN 978-0-19-513052-2, and Stiglitz (J.E.), "The Theory of Local Public Goods Twenty-Five Years After Tiebout: A Perspective", Working paper 954, National Bureau of Economic Research, August 1982.

[3] Woodward (D.) and Smith (R.D.), *Global Public Goods and Health: Concepts and Issues*, WHO, Geneva, 2010.

[4] General Assembly resolution 63/311, paragraphs 18 and 19.

Figure 1: Nested evaluations



Level	Evaluand	Scope
IV	Beneficiaries	Results and impact
III	Partnership between implementing partners, the United Nations and donors	Results, efficiency, effectiveness, relevance, compliance and evaluability Operations research
II	Partnership between implementing partners and the United Nations country team (UNDAF evaluation)	UNDAF - efficiency, effectiveness, relevance, and evaluability Coordination between the United Nations and other donors
I	Partnership between implementing partners and UNFPA (UNFPA country programme evaluation)	Efficiency, effectiveness, relevance, compliance and evaluability Operations research

III. EVIDENCE-BASED PROGRAMMING

5. The expanding array of contributors to development parallels an expanding array of instruments. While microfinance organizations and community development banks have flourished, other tools using market mechanisms, such as microcredit[5] community development venture capital or patient capital[6], have also been successful. Yet, despite this evolution, official development assistance remains measured, either by financial volume or by politically defined targets, such as the Millennium Development Goals. As pointed out by several authors[7], while measuring inputs is useful, there is a need to focus more on measuring results and impact. Donors (including bilateral and multilateral organizations, non-governmental organizations and foundations) typically complete internal evaluations that focus on individual institutions and do not capture the overall impact of policies and programmes at country, regional or global levels.

[5] Banerjeey (A.), Duflo (E.), Glennersterx (R.), Kinnan (C.), "The Miracle of Microfinance? Evidence from a Randomized Evaluation", MIT, May 30, 2009.

[6] Patient capital is a third way that seeks to bridge the gap between the efficiency and scale of market-based approaches and the social impact of pure philanthropy. See Novogratz (J.), "The Blue Sweater: Bridging the Gap Between Rich and Poor in an Interconnected World", 2009, MacMillan, USA.

[7] See note 3 and Michael A. Clemens and Todd J. Moss (2007), "The Ghost of 0.7%: Origins and Relevance of the International Aid Target", International Journal of Development Issues 6 (1): 3-25.

6. Within the evaluation community, a consensus exists that the quality of evaluation is most closely linked to the quality of programme design. Good-quality programmes are more likely to achieve desired results and impact, and to be amenable to evaluations that can verify the results and identify elements of how the programme was implemented, as a basis for lessons learned. This simple assertion implies a more complex debate about the definition of what an effective programme is. For the purpose of this report, one may reflect the general consensus that effective programmes are theory-based, offering a conceptual rationale, in addition to their achieving desired outcomes or outputs. Evidence can be generated by macro-level organizational change theory or systems analysis, which is based on a thorough and systematic data review[8] and by operations research[9]. Both approaches are not mutually exclusive; their combination is one of the best approaches to establish a fruitful relationship between policy and research.

7. During the 2008-2009 period covered by this report, the UNFPA Division for Oversight Services developed and implemented a standardized method to review UNFPA country programme design. The method focuses on three elements: (a) relevance; (b) strategic alignment; and (c) the quality of monitoring and evaluation. Based on the results of oversight work in 2008 and 2009 that included the review of 11 country programmes, several recurring themes emerged.

8. With regard to relevance, programme design in country programmes deemed partially satisfactory or unsatisfactory lacked evidence-based information. Such information is necessary to support the choice of UNFPA intervention strategies and geographical subregions. Though programme design tries to meet multiple needs, it would be preferable to focus on a limited set of interventions with demonstrated evidence of effectiveness. This would avoid dispersed and small-scale efforts managed through a large number of annual work plans, with significant administrative overhead.

9. With regard to strategic alignment, UNFPA country programmes are generally well-aligned with national development frameworks. However, in some country programmes, the pivotal role of UNFPA with regard to the implementation of the census and capacity development to support the use of data is absent from the United Nations Development Assistance Framework. This raises the risk that these activities might not benefit from the support of the United Nations country team, despite the widely agreed benefits of their outputs (for example, census data and the improved use of data in planning) for all development partners.

10. With regard to monitoring and evaluation, country programmes deemed partially satisfactory or unsatisfactory usually lack indicators, and indicators lack baseline data and/or targets and the means of verifying progress. Monitoring and evaluation must evolve in UNFPA so that the necessary indicators, baseline data and/or targets are developed during the programme design phase and integrated into the programme. Table 1, below, provides an overview of recurrent findings of the Division for Oversight Services.

[8] Caldwell J.C., Phillips J.F., Khuda B. (eds). 2002. Special Issue: Family planning programs in the twenty-first century. Studies in Family Planning 33 (1).

[9] Carlos Brambila, Emma Ottolenghi, Celeste Marin and Jane T. Bertrand, "Getting results used: evidence from reproductive health programmatic research in Guatemala". Health Policy and Planning 2007; 22:234–245.

Table 1: Evaluation of country programmes: recurrent findings

Domain	Recurrent weaknesses/high risks	Potential remediation and mitigation measures
Relevance	Lack of focus on interventions with evidence of effectiveness; lack of an evidence-informed assessment of needs	Structured technical review of planned interventions during programme development
Strategic alignment	Absence of census from United Nations Development Assistance Framework and United Nations country team workplans	Systematic regional office review to ensure inclusion of census in United Nations Development Assistance Framework and mobilization of United Nations country team support for census
Quality of monitoring and evaluation	Missing indicators, and/or baselines and/or targets, and no evidence of using knowledge and monitoring information systematically	Referral or conditional approval of country programme documents submitted without results frameworks that include specified indicators, baselines and targets

11. The review by the Division for Oversight Services could neither indicate a significant investment in operations research nor could it demonstrate a reliable evaluability of programmes that would provide information on impact or results. This would enable knowledge utilization for subsequent programme cycles. Greater efforts by UNFPA are needed to make evidence-based programming possible for all programmes, as requested in paragraph 10 of Executive Board decision 2009/18.

12. By ensuring that evidence-based information and benchmarks are available, UNFPA has the opportunity at the programme-inception phase to: (a) build a solid partnership with implementing partners and stakeholders; (b) elaborate rational programme content where capacity-building is linked to clear priorities, where gender and community mobilization strategies relying on cultural and religious values are interwoven in the programme, and where innovative interventions are tested with appropriate methodologies[10] for scaling up; and (c) demonstrate a positive contribution to the efforts and investments deployed by programme countries to improve the quality of life of beneficiaries.

IV. UNITED NATIONS REFORM, UNFPA AND THE HARMONIZATION OF EVALUATION METHODOLOGIES

13. The methodological issue in evaluation today is less about having the 'right' methodology than about establishing and following methodological guidance that would harmonize approaches within UNFPA as well as within the United Nations system, in order to facilitate comparisons of results. Harmonized methods imply a convergence of evidence-informed programming as a key condition for successful evaluation; they would facilitate the elaboration of programme content with appropriate results-based management and indicators, and would thus lead to programmes with adequate levels of evaluability. However, evaluations are performed using different methodologies, which makes comparisons and benchmarking difficult. The consistent application of methodologies is necessary in order to avoid an 'evaluation gap' that affects many institutions that provide assistance. UNFPA is no exception. The review of evaluation methodologies by the Division for Oversight Services indicates wide

[10] Duflo (E.), Kraemer (M.), "Use of Randomization in the Evaluation of Development Effectiveness", MIT, 2009.

disparities and calls for efforts to harmonize not only within UNFPA but also with other United Nations partners.

14. With the approval by the Executive Board in 2009 of the UNFPA evaluation policy, UNFPA has taken steps to strengthen evaluation and comply with General Assembly resolution 62/208. While the UNFPA policy may strengthen evaluation, it can do little to address the system-wide coherence envisioned in General Assembly resolution 63/311, endorsing a system-wide evaluation function in the absence of a United Nations-wide commitment to harmonization. At present, the main vehicle for such efforts is the United Nations Evaluation Group. In the light of constraints imposed by the United Nations Evaluation Group, the Division for Oversight Services completed a review of all United Nations Evaluation Group working groups and task forces in 2009, to identify which ones would be most relevant for UNFPA. The review prioritized several United Nations Evaluation Group activities in which UNFPA was able to participate in the latter part of 2009. The United Nations Evaluation Group, at its global meeting in April 2010, will discuss the issue of extending participation in United Nations Evaluation Group task forces to those responsible for decentralized evaluations.

15. The harmonization of methodologies is thus a long-term project. Based on the varying capacity for evaluations of United Nations system organizations, any entity designed or constituted to perform a system-wide evaluation function, as per General Assembly resolution 63/311, will likely be more effective if designed or constituted with flexibility, in order to maximize participation and collaboration among the evaluation units of various organizations.

V. CAPACITY DEVELOPMENT

16. In recent years, about one quarter of donor aid, or more than $15 billion a year, has been invested in technical cooperation, the major part of which is ostensibly aimed at capacity development[11]. General Assembly resolution 62/208 pays great attention to capacity. In response, United Nations entities have felt compelled to emphasize their efforts and commitment to developing capacity. The most common misunderstanding about capacity development relates to its conceptualization as a unidirectional knowledge transfer from those who have expertise to those who need it. Evidence indicates that capacity development is unlikely to succeed if the following conditions are not met:

(a) broad-based participation and a locally driven agenda;
(b) building on local capacities;
(c) ongoing learning and adaptation;
(d) long-term investments;
(e) integration of activities at various levels to address complex problems.[12]

17. According to OECD, capacity development should be understood as an "endogenous process, strongly led from within a country, with donors playing a supporting role. According to this vision, political leadership and the prevailing political and governance system are critical factors in creating opportunities and setting limits for capacity development efforts. Country policy ownership is not a simple yes/no issue, but a matter of processes and trends".

[11] OECD, *The Challenge of Capacity Development: Working Towards Good Practice*, OECD Journal on development, Vol. 8, No. 3 – ISSN 1816-8124 – © OECD 2008.
[12] Canadian International Development Agency, "Why, What and How", CIDA, Policy Branch Vol. 1, No. 1, Gatineau, Quebec, Canada, May 2000.

19. Thus, capacity development is no exception to other areas of development. It is a partnership. This partnership requires better understanding among all parties to be able to respond to the widening scope of evaluation, the diversification of tools, and the momentum towards joint evaluations within the rapidly evolving development assistance environment. If evaluation is to be understood in this context, then all evaluation methodologies should explain how the programme interventions implemented and assessed capacity-development efforts. Without this change, it will be difficult to implement paragraph 129 of General Assembly resolution 62/208 on strengthening evaluation capacities in programme countries.

19. UNFPA is making progress on this issue. Regionalization and the development work for the UNFPA evaluation policy during 2008-2009 created an internal focus on UNFPA evaluation capacity development efforts. In October 2009, the Africa Regional Office, with the participation of staff from the Learning and Career Management Branch, Division for Human Resources; the Programme Division; and the Division for Oversight Services held a week-long training programme for country office monitoring and evaluation officers and focal points. UNFPA commitment to developing and supporting regional evaluation capacity will, in turn, strengthen the capacity of programme countries to undertake evaluations. Thus, with regard to capacity development, it is too soon to assess progress since the approval of the evaluation policy in June 2009, and to provide a definitive assurance statement on UNFPA activities undertaken to enhance the evaluation capacity of its implementing partners.

VI. INDEPENDENCE AND PARTNERSHIP

20. The shared responsibility of governments extends to evaluation, focusing on results or on the contribution to the results of development partnerships. The notion of shared accountability calls for a re-examination of the concept of independence in evaluation. The focus of General Assembly resolution 62/208 on joint efforts and national ownership has created tension about the issue of independence and uncertainty about the value and risks of evaluation partnerships; in many cases, it has created institutional worries in the United Nations system.

21. The dilemma can be described as follows. On the one hand, the consensus on partnership in evaluation and the recognition of 'leadership and ownership of programme countries in the evaluation of all forms of assistance, including that provided by the United Nations development system', implies that evaluation occurs where assistance takes place and by the actors providing and receiving the assistance. Evaluation is thus a decentralized process that is embedded in development activities where they are implemented; this process legitimizes the evaluation of donor programmes by programme countries. On the other hand, as long as evaluation capacity has not reached the desired level in programme countries, the risk exists that professionals undertaking evaluation could also be involved in implementing programmes, thus compromising independence and objectivity. This dilemma can be avoided by adopting different modalities that guarantee independence for each level of evaluation, as described in figure 1 (nested evaluations). Table 2, below, which proposes mechanisms to guarantee the independence of evaluators, illustrates that reliance on and compliance with globally recognized evaluation norms and standards may be the most effective way of guaranteeing independence, even in the context of complex partnerships.

Table 2 Evaluations and independency mechanisms

Level	Evaluand	Scope	Mechanisms to guarantee independence
IV	Beneficiaries, partnerships, implementing partners and donors	Results and impact	Third party evaluations, globally accepted norms and standards, transparency (for example, disclosure of programme theory, methodology, data, analysis and results), ownership and leadership by implementing partners
III	Partnerships, implementing partners and donors	Results, efficiency, effectiveness, relevance, compliance and evaluability Operations research	Third party evaluations, globally accepted norms and standards, transparency (for example, disclosure of programme theory, methodology, data, analysis and results) Ownership and leadership by implementing partners
II	United Nations country team United Nations reforms	United Nations Development Assistance Framework Efficiency, effectiveness, relevance, evaluability Coordination between the United Nations and other donors	United Nations evaluation team or third party, assurance provided by oversight units on design, methodology, collection and analysis of data, results and report, globally accepted norms and standards, transparency (for example, disclosure of programme theory, methodology, data, analysis and results), independent system-wide evaluation mechanism (General Assembly resolution 48/162)
I	UNFPA country programmes	Efficiency, effectiveness, relevance, compliance, evaluability Operations research	UNFPA or third party, assurance provided by oversight units on design, methodology, collection and analysis of data, results and report, globally accepted norms and standards, transparency (for example, disclosure of programme theory, methodology, data, analysis and results)

22. Since the UNFPA policy on evaluation has only recently been adopted, evaluations conducted by UNFPA country offices do not yet reflect the revised approach. All evaluations conducted between 2009 and February 2010 are level 1 evaluations, with little or no participation of implementing partners and beneficiaries. None of the evaluations address the UNFPA contribution to the embedded partnerships, even in countries with programme-based or sector-wide approaches.

23. To implement the evaluation policy, UNFPA and the Division for Oversight Services clarified roles and responsibilities with regard to planning, implementation, supervision, quality assurance and follow-up of evaluations. The Programme Division is responsible for organizational learning, supporting

country programme evaluations and follow-up of evaluations, the Division for Oversight Services is responsible for quality assurance and independent thematic evaluations.

28. The UNDP's evaluation policy distinguishes between centralized and decentralized evaluations. The Division for Oversight Services carries out centralized evaluations with the primary purpose of assurance, while management undertakes decentralized evaluations to build the evidence base of results achieved and to identify lessons learned from effective programming. With the support of the regional offices, the Programme Division facilitates fund-wide coordination.

29. In contrast with other United Nations organizations, UNDP has evaluation resources throughout the organization rather than in one organizational unit. Since more than one division is responsible for evaluation, UNDP has, in 2009 and 2010, strengthened these divisions and a number of country offices in terms of human resources, in order to respond to the Executive Board and to implement the evaluation policy. One challenge for UNDP is, especially at the country level, is that some staff members must assume the additional functions of serving as focal points on monitoring and evaluation, which will increase their already heavy workload. This makes it difficult to move as quickly as needed to implement the evaluation policy.

30. Based on the evaluation policy, UNDP's would have adequate staff to conduct evaluations if all such staff had sufficient expertise. This is a critical point for the debate on independence. The quality of design, methodologies, implementation and conduct of evaluations is a prerequisite for independence, an area that needs greater attention by UNDP's.

VII. QUALITY AND RELIABILITY OF EVALUATIONS

31. The international community can draw on a variety of publications on evaluation quality and reliability, including norms and standards. UNDP's relies on United Nations Evaluation Group standards. These norms and standards are in line with best practices sanctioned by professional evaluation associations around the world. The starting point of a global partnership on evaluation should thus be a global consensus and partnership on norms and standards, a necessary condition for ownership and compliance by all involved parties, including civil society organizations and beneficiaries of development interventions.[7] Accordingly, UNDP's should comply with its evaluation policy and meet quality standards in its evaluative work. To assess the degree of compliance, the Division for Oversight Services conducted an evaluation quality assessment exercise in 2009 that included evaluations performed during the period covered by this report (2008-2009). The results of this review are available on www.undp.org/public oversight and are summarized below.

32. All UNDP's business units report their evaluation work through an annual reporting process. For 2008, country offices reported 102 evaluations. For 2009, country offices reported 139 evaluations. In addition, the Division for Oversight Services completed three thematic evaluations (two in 2008 and one in 2009), and the evaluation quality assessment.

33. Thematic evaluations of UNDP's experience in assistance effectiveness, through participation in sector-wide approaches and joint programming, yielded findings in the latter half of 2008. Such evaluations noted that UNDP's had been among the leading United Nations organizations to engage in

[7] Chianca, T. (). "The OECD/DAC Criteria for International Development Evaluations: An Assessment and Ideas for Improvement". Journal of Multidisciplinary Evaluation, Vol. 5, No. 9. ISSN 1556-8180. March 2008.

these modalities, and that the coordination workload required to ensure successful implementation of and participation in joint programming and sector-wide approaches was substantial. The 2009 evaluation of the UNFPA humanitarian response provided management with recommendations to improve the progress made since the endorsement by the Executive Board, in decision 2006/35, of the UNFPA strategy for emergency preparedness, humanitarian response, and transition and recovery. The recommendations of the 2009 evaluation focused on mainstreaming humanitarian response in UNFPA country programmes. They also focused on reviewing business processes to increase UNFPA effectiveness in timely procurement and hiring during humanitarian crises.

30. UNFPA requested all country offices, regional offices and headquarters units to submit evaluations completed during 2007-2008, as part of the evaluation quality assessment process. For the period 2007-2008, the Division for Oversight Services received 57 evaluations completed by UNFPA country offices, a significantly lower number than the 197 evaluations reported by country offices for the same period, and the 116 reported for the 2007-2009 period. The Division for Oversight Services received no submissions from regional offices or headquarters units, whereas the former reported having completed four and the latter 11 for the same period. The discrepancy between the number of evaluations that are reported by business units in their annual reports and the number of those provided to the Division for Oversight Services for review is of concern. Either the self-reporting of the entities is inaccurate or the entities are not submitting the documents to the Division for Oversight Services, which is mandated by the UNFPA oversight policy to receive such evaluations. Regardless of the cause, UNFPA must address this deficiency.

31. In the absence of the systematic recording of evaluations by management, the Division for Oversight Services is unable to provide assurance on the number of evaluations completed in UNFPA. Of the 57 evaluations submitted by country offices during the 2007-2008 biennium, 17 were evaluations of UNFPA country programmes, nine were midterm reviews and 31 were evaluations of other programmes or projects supported by UNFPA. As in previous years, teams of national and international evaluators conducted most of the country-level evaluations.

32. The 2009 evaluation quality assessment exercise reviewed 37 of 57 evaluations. Overall, results show little change from the 2008 and 2005 evaluation quality assessment exercises. The large proportion of evaluation reports that lack basic elements of evaluation (such as clear statements of evaluation questions, methods suitable to answer the evaluation questions, findings arising from data and evidence gathered through the application of said methods, and conclusions and recommendations grounded in the findings) suggests that quality could be improved by implementing a systematic review and coaching process for UNFPA evaluations. Modest improvements in the evaluation of effectiveness, the validity of methods and attention to gender mainstreaming are evidence that improvements are possible. As quoted in published reviews[10], this situation is not unique to UNFPA.

33. Attention must be given to evaluating programme relevance and impact. Both dimensions are assessed in UNFPA evaluations as the proportion of evaluations meeting standards in these areas. This proportion has fallen precipitously. The 2009 evaluation quality assessment report provided to management includes recommendations, which, when implemented, would improve the quality of evaluation, based on their success in other settings.

[10] Barham D. Savedoff et al., "When Will We Ever Learn? Improving Lives through Impact Evaluation", Report of the Evaluation Gap Working Group, Center for Global Development, Washington, D.C., May 2006.

34. In order to ensure consistency between the number of evaluations reported by UNFPA entities and the number that were submitted to the evaluation quality assessment process, UNFPA must develop systems to track and verify evaluation activities. This is a necessary step to provide assurance and ensure that lessons learned are disseminated as widely as possible. The quality of the modest number of evaluations available for review demonstrates scope for improvement.

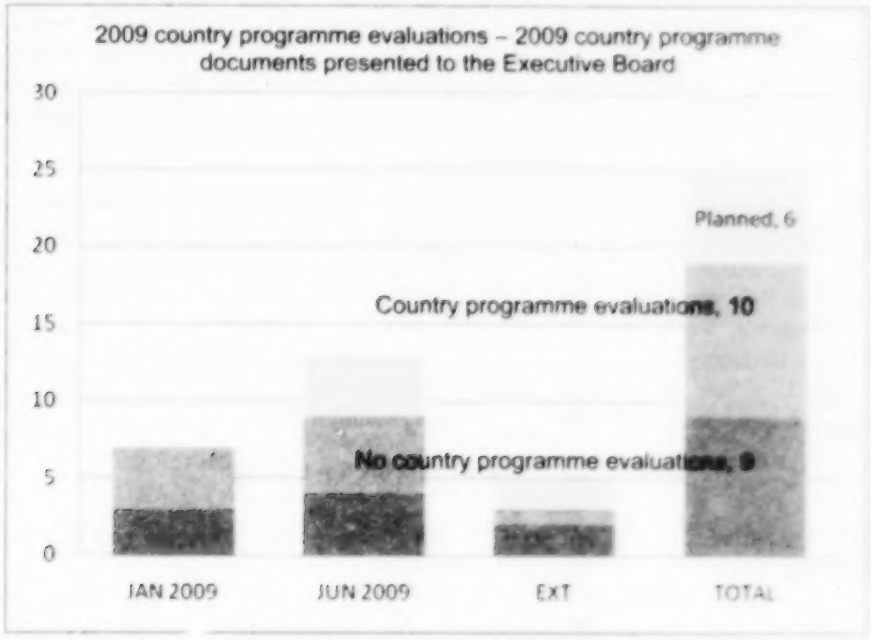
VIII. LEARNING FROM EVALUATION

35. For the purpose of evaluation, transparency refers to at least three criteria: (a) the accuracy and reliability of the evaluation findings, which in turn depends on the level of qualification and independence of the evaluators; (b) the reliability of the evaluation itself (globally accepted norms and standards); and (c) the dissemination and use of the report, including recommendations. The consensus on a wide dissemination of results should be the rule, reflecting the notion that partnership extends to the public at large so that evaluation findings can inform and strengthen not only governmental partners but also civil society partners and stakeholders.

36. UNFPA management has informed the Division for Oversight Services that it is developing systems, for deployment in 2010, to ensure a systematic response to and follow-up of decentralized evaluation recommendations and to disseminate lessons learned. For centralized evaluations, the Division for Oversight Services extended the Comprehensive Assessment Recommendations Database Systems used to track audit recommendations to include recommendations from centralized evaluations completed from 2009 onward. In addition, all evaluations reviewed through the evaluation quality assessment process have been made available to the research and professional communities through an evaluation database developed and managed by the Division for Oversight Services. Paragraph 20 of the UNFPA evaluation policy (DP/FPA/2009/4) states that "in accordance with the UNFPA accountability framework and the UNFPA oversight policy, the Executive Director will normally disclose reports to the public, while exercising discretion in protecting the legitimate rights of programme countries." In line with this policy, the contents of the evaluation database are available on the UNFPA website (www.unfpa.org/public/about/oversight).

37. In the light of the centrality of UNFPA country programmes, the Division for Oversight Services reviewed the ability of UNFPA to plan evaluation in a timely manner and to use country programme planning cycles as an opportunity to influence decisions. Of the country programmes considered by the Executive Board in 2009, 40 per cent had been evaluated so as to inform the design of the subsequent programmes. A further 24 per cent planned to do evaluations; these may be unlikely to inform the development of the subsequent country programme due to the evaluations occurring after Executive Board approval of the programme. The review of evaluation activities in relation to UNFPA country programmes submitted to the Executive Board in 2009 is summarized in figure 2.

Figure 2: Country programme evaluations for 2009 country programme documents



IX. CONCLUSION

38. UNFPA has taken important steps to strengthen evaluation. Accomplishments of the 2008-2009 period include: (a) the development of an evaluation policy; (b) the establishment and staffing of regional monitoring and evaluation posts in all UNFPA regional offices; and (c) the appointment of monitoring and evaluation focal points in a number of country offices.

39. Recurring evaluation findings and recommendations highlight scope for improvement in evidence-based programme design, programmatic focus, and attention to monitoring and evaluation. In addition, an analysis of the coverage of evaluations suggests that UNFPA needs to take action to ensure that it complies with paragraph 8 of Executive Board decision 2009/18, and that it ensures that all country programmes are evaluated at least once during their cycle.

40. In 2009, the Division for Oversight Services assessed the quality of evaluation at UNFPA. Even though there are no major differences from the 2005 evaluation quality assessment, the Division has noted improvements in the assessment of effectiveness, the validity of methods and gender mainstreaming. Attention must be paid to assessing the relevance and impact of UNFPA efforts. Improving quality will require an enhanced culture of evaluation and accountability for results within UNFPA, a finding that is not uncommon in the United Nations system. Capacity development to support such a culture will need to be negotiated with commitments to joint evaluations and strengthened national ownership of evaluation. A systematic management response and follow-up to evaluation recommendations will ensure that UNFPA maximizes the effective use of its resources in achieving its goals.

41. The challenge for UNFPA is to improve its internal evaluation processes while keeping pace with the national emphasis on ownership and leadership. These trends challenge the role of UNFPA and of other United Nations organizations. Such an examination will need to address the nature of the UNFPA role in the three-way relationship between: (a) the accountability requirements of donors attached to development assistance funding; (b) the increased ownership and leadership by programme countries of programmes and their evaluation; and (c) the UNFPA desire to demonstrate progress in achieving its mandate.

42. General Assembly resolution 62/208 can be understood as committing UNFPA and programme country governments to evaluating issues of mutual interest, focusing on the development results to which UNFPA and programme countries are committed. This commitment implies that evaluation will be of most value when it focuses on the results experienced by beneficiaries. For UNFPA, these results would include, for instance, the numbers of pregnant women who no longer die during childbirth, and a reduction in the frequency of gender-based violence. Accepting this as a suitable approach to evaluation, UNFPA should pursue this matter while reviewing its strategic plan, 2008-2013, as well as institutionalize it in the subsequent strategic plan, beginning in 2014.

X. RECOMMENDATION

43. The Executive Board may wish to take note of the biennial report on evaluation, as contained in the present document (DP/FPA/2010/19).